

VOLUNTARY REMEDIATION APPLICATION FORM

Voluntary Remediation Program
Louisiana Department of Environmental Quality

The voluntary remedial action plan for this site and the application review fee must be included with this Voluntary Remediation Application form, as provided in LAC 33:VI.911.B, or this Voluntary Remedial Investigation Application will be considered incomplete and not be accepted for review.

I. Applicant Information		
Section A: Applicant		
Name/ Company Name:		
Mailing Address:		
City:	State:	Zip Code:
Contact Person:		
Phone No:	Fax No:	
Email Address:		
Interest in Property:		
Section B: Co-Applicant		
Name/ Company Name:		
Mailing Address:		
City:	State:	Zip Code:
Contact Person:		
Phone No:	Fax No:	
Email Address:		
Interest in Property:		
Section C: Co-Applicant		
Name/ Company Name:		
Mailing Address:		
City:	State:	Zip Code:
Contact Person:		
Phone No:	Fax No:	
Email Address:		
Interest in Property:		
Section D: Current Property Owner (if different from applicants)		
Name/ Company Name:		
Mailing Address:		
City:	State:	Zip Code:
Contact Person:		
Phone No:	Fax No:	
Email Address:		

II. Site Information			
Agency Interest Number (if exist):			
Site Name:			
Parish:			
Property Size (acres):			
Physical address or direction and distance from nearest intersection:			
Latitude:	0	"	'
Longitude:	0	"	'
Section/Township/Range (attach legal property description):			
Adjacent Property Owners (persons listed as owners of the adjacent properties on the rolls of the parish tax assessor as of the date on which the voluntary remediation application is submitted):			
Current Property Use (Describe in detail. Use percentages if more than one use.):			
Past (historical) Property Use (Describe in detail):			
Future Property Use (Describe in detail. Use percentages if more than one use.):			
Current Land Use Surrounding Property:			
Contaminant Type(s) and Affected Media:			

Applicant(s) must also attach to this form all available historical assessment and or investigation information available for the site, including Phase 1 and 2 Assessments, analytical data, etc.

III. Eligibility Information		
Permitted Hazardous Waste Unit(s) on site?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Site Proposed for Listing on the NPL?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Site Listed on the NPL?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Any Pending Federal Environmental Enforcement Actions Associated with the Site?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, explain		
Any portion of the site UST Trust Fund Eligible?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, explain		
IV. Type of Voluntary Remedial Action Proposed		
<input type="checkbox"/> Voluntary Remedial Action		
<input type="checkbox"/> Partial Voluntary Remedial Action (See note below)		

If Partial Voluntary Remedial Action is checked, the applicant and co-applicants must each complete and attach a Partial Remedial Action Supplemental Application Form.

V. Certification	
All applicants must certify the following with their signature below:	
I (we) certify that all of the information I (we) have provided in this Voluntary Remedial Investigation Application is true and correct to the best of my information, knowledge, and belief. I (we) understand and agree that I (we) am obligate to update and notify this application if I (we) learn that information that I (we) have provided is misleading or no longer correct. I (we) further certify that I (we) understand I (we) am responsible for and agree to reimburse the Louisiana Department of Environmental Quality for all actual direct costs associated with reasonable and appropriate oversight activities of the Department conducted pursuant to LAC 33:VI. Chapter 9, including, but not limited to, review, supervision, investigation, and monitoring activities.	
Primary Applicant Signature:	Date:
Co-Applicant Signature:	Date:
Co-Applicant Signature:	Date: